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Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>				<b>Complete If Known</b>	
				Application Number	10/576,342
				Filing Date	April 18, 2006
				First Named Inventor	DELATTRE, Cyril
				Art Unit	TBA
				Examiner Name	TBA
Sheet	1	of	2	Attorney Docket Number	10404.038.00-US

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Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
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Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
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Examiner Signature	/Ann Lam/	Date Considered	02/28/2010
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /A.L./